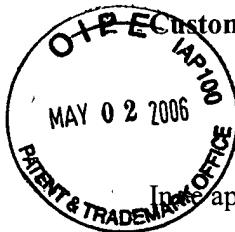


DOCKET NO. PRES06-00181

*1 Fee*  
3731

PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Information application of : RONALD A. SCHACHAR, ET AL.  
U.S. Serial No. : 10/080,877  
Filed : February 22, 2002  
For : SYSTEM AND METHOD FOR MAKING INCISIONS FOR SCLERAL  
EYE IMPLANTS  
Group No. : 3731  
Examiner : Darwin P. Erez

**MAIL STOP AMENDMENT**

Commissioner for Patents  
P. O. Box 1450  
Arlington, VA 22313-1450

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL**

Sir:

The undersigned hereby certifies that the following documents:

1. Amendment and Response to Office Action;
2. Petition for Extension of Time - 2 month (in duplicate);
3. Fee Transmittal for FY 2006 (in duplicate);
4. Check in the amount of \$450.00 (for two month Extension of Time fee); and
5. Postcard receipt

relating to the above application, were deposited as "First Class Mail" with the United States Postal Service, addressed to MAIL STOP AMENDMENT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on April 28, 2006.

Date: April 28, 2006

Kathy Hamilton  
Mailer

Date: April 28, 2006

W. Munck  
William A. Munck  
Reg. No. 39,308

P.O. Drawer 800889  
Dallas, Texas 75380  
Phone: (972) 628-3600  
Fax: (972) 628-3616  
E-mail: [wmunck@munckbutrus.com](mailto:wmunck@munckbutrus.com)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

 <p>Effective on 12/08/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <p><b>FEETRANSMITTAL</b> For FY 2006</p> <p>MAY 02 2006</p> <p>TRADEMARKS</p> <p>Applicant claims small entity status. See 37 CFR 1.27</p> <p><b>TOTAL AMOUNT OF PAYMENT</b> (\$ 450.00)</p>		<b>Complete if Known</b> <table border="1"> <tr> <td>Application Number</td> <td>10/080,877</td> </tr> <tr> <td>Filing Date</td> <td>February 22, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Ronald A. Schachar</td> </tr> <tr> <td>Examiner Name</td> <td>Darwin P. Erez</td> </tr> <tr> <td>Art Unit</td> <td>3731</td> </tr> <tr> <td>Attorney Docket No.</td> <td>PRES06-00181</td> </tr> </table>		Application Number	10/080,877	Filing Date	February 22, 2002	First Named Inventor	Ronald A. Schachar	Examiner Name	Darwin P. Erez	Art Unit	3731	Attorney Docket No.	PRES06-00181
Application Number	10/080,877														
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First Named Inventor	Ronald A. Schachar														
Examiner Name	Darwin P. Erez														
Art Unit	3731														
Attorney Docket No.	PRES06-00181														

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 50-0208 Deposit Account Name: Davis Munck P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  
under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity  
Fee (\$) Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=				

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	=			

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

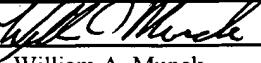
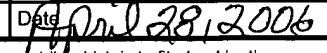
Non-English Specification, \$130 fee (no small entity discount)

Other: Petition of Extension of Time -two month fee

Fees Paid (\$)

\$450.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	39,308	Telephone	(972) 628-3600
Name (Print/Type)	William A. Munck	Date			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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